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IV-9
DESCRIPTION OF A WORKSHOP PROJECT IN MENTAL HEALTH

Jane Beasley Raph*

2nd year

INTRODUCTION

A guidance worker asks, "Have I perhaps been counseling with platitudes and oversimplification?" One teacher questions, "I wonder why our culture doesn't allow an interplay between teacher and pupil for genuine expression of affection?" Another inquires, "Why do I get angry at colleagues who plan an easier program for themselves than I do?" These comments indicate some of the concerns of teachers in a concluding discussion of a course in Mental Health for educators. The statements also reflect a shift many of the class members had made. At the outset of the course some of them had confined their attention chiefly to problems in classroom management and student achievement. During the closing sessions more of them were focusing on the psychological correlates of behavior, their own as well as that of their pupils.

This Workshop Project provided an intensive course in Mental Health for two groups of teachers, one in the fall of 1958, and one for a second group of teachers in the fall of 1959. The Project led to many new perspectives in relationships, not only among the class members themselves, but also among the sponsors

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who had first envisioned the two courses, and who gave the undertaking their care and attention throughout the months of preliminary planning, implementation, and later evaluation.

A description of this Project sponsored jointly by the Education and Scholarship committees of Morris County (New Jersey) Mental Health Association and the School of Education, Rutgers - The State University is presented here in the hope that such information will prove useful to other groups interested in similar undertakings. *

PRELIMINARY PLANNING

Selection of Participants

The decision of the Scholarship committee to make the courses available to school personnel was thought to have dual benefits. In the first place, the orientation of a key professional group such as this to new developments and resources in mental health held promise for its becoming better informed and better able to contribute to the community's understanding and acceptance of responsibility for mental health problems. Secondly, it was considered that an educational group would have unique opportunities to draw upon mental health concepts in its direct contacts with large numbers of children and youth in the

* Committee members were as follows: Dr. Virginia Harter, Mrs. Ruth Van Doren, Sister Loretta Marie, Mrs. Mildred Mahncke, Miss Helen Shepard, and Mr. Dale Weaver.

schools, and as a consequence of a course such as this would be more likely to foster healthy personality development in their pupils.

The members of the first class were selected by their superintendent or principal and sent as a delegate from their school system. The members of the second class applied voluntarily and were selected in such a way as to obtain county-wide geographical representation and a membership representative of the various specializations within education. These included nursery school, kindergarten, elementary, and secondary teachers of private and public schools, nurses, administrators, and guidance counselors.

Although it is universally recognized that educators have a strategic role in the development of good mental health in their students, teacher preparation for this role is a fairly new function in the training institutions. Teachers who received their training prior to the early 1950's often lack any substantial work in psychology. Teachers who have been more recently graduated are faced with many unknowns in their day-to-day dealings even though they have had appropriate academic courses. A number of writers have called attention to the critical importance of in-service training in this area whether it be to provide a practical supplement to undergraduate work in mental hygiene, or, as is frequently the case, to furnish teachers with new insights into the emotional development of

their pupils. Kanzer (1952) says, "The introduction and development of psychological insights among teachers is one of the most important problems of prophylactic psychiatry." Stouffer (1952) also calls attention to this point of view when he states, "There must be continued instruction of the teacher in the dynamics of child behavior. New knowledge must continually be a part of the teacher's understanding and approach to the child." Bernard (1958) feels that "many of the teachers who have the readiness for and the capacity to merge mental health concepts, as taught by clinicians, into their own educational approach are often able to enhance the effectiveness of their teaching through access to in-service opportunities and these should by all means be extended. Stevenson (1954) regards teachers as being in a position to "buffer some of the adverse influences that bear upon the child. They are in a position to provide a good atmosphere within the school that can counterbalance the reverse at home and in the neighborhood. The least that one can expect of the school is that it should not hurt the child further, and to this end that it should take into account that children differ and need different kinds of help from school."

Plan of the Workshop

Once the committee had designated the educational group as the appropriate recipients of the Workshop Project, it then called upon the School of Education, Rutgers - The State University of

New Jersey for assistance in the planning, organization, and instructional aspects. *

It was decided to offer the courses on a graduate credit basis for eight weekly double sessions, each an hour and forty minutes in length, with an hour between the sessions for dinner served on the premises.

A number of outstanding professional leaders engaged in some phase of mental health work were to talk during the afternoon sessions of the classes, and would act as discussion leaders. These persons included two psychiatrists, two psychologists, a school social worker, a school counselor, a former school administrator, and a prominent professional lecturer in family relations. The evening meetings were to follow the theme of the afternoon ones with a topical presentation by the instructor and additional class discussion. At one meeting during the first course a group of parents were also to present their views on ways parents might assist teachers in understanding children. At both courses the sponsors were to talk briefly on activities, publications, and resources of the county, state, and national Mental Health Association.

* Dr. Robert Poppendieck, then Director of Administrative Services in the School of Education, Rutgers, and now Specialist in Teacher Education, United States Office of Health, Education, and Welfare, was largely responsible for this stage of the planning.

Topics of the sessions were to include the following:

(1) Meanings of Mental Health and Its Importance in the Life of Teachers and Students; (2) Personal and Cultural Bases of Personality Development; (3) Identifying Symptoms of Emotional Health and Ill Health in Children; (4) The Relationship of Anxiety, Hostility, and Reactions to Authority to a Child's Development; (5) Understanding and Dealing with Behavior and Learning Difficulties in Children; (6) The Limitations and Potentials of the Teacher's Role in Assisting Healthy Emotional Growth in Children; (7) School and Community Resources for Improving Mental Health in Children.

Costs of the Workshop

The costs of the Workshop Project were originally planned to be carried in their entirety by the Morris County Mental Health Association. However, as an outcome of the joint planning which evolved between the committee and the school systems in the county, the Association financed the tuition costs of the students and the honorarium paid the speakers. Registration fees and books were paid for by the local school systems in some instances and by the students themselves in other instances. The University paid the salary and travel expenses of the instructor.

Evaluation of the Workshop

The obstacles to evaluation of Mental Health programs are familiar to anyone concerned with research in this area.

Nevertheless, it was decided to try to obtain two measures of change: (1) Analysis of subjective judgments made by the class members themselves in a weekly log or final summary paper relative to new knowledge and understandings gained during the course; (2) Comparison of pre and post test scores of the two class groups (1958 and 1959), on expressed attitudes toward children as measured by the Minnesota Teacher Attitude Inventory. The second course also used a Control group made up of teachers in the county who were not enrolled in the course but who took the tests at the same time as the course participants.

THE PROCESS

As is often the case in a pilot endeavor the ending would make a good beginning. Since the courses were exploratory in nature, a clarification of purposes and process occurred throughout which could well form the nucleus of future workshops. The instructor trimmed some of her sails of aspiration as did the participants. The class members progressed from discomfort at the lack of specific assignments and tests, through a period of uneasy trust in freedom, to achievement of some very meaningful individual analyses of particular problems in their lives or in their teaching. A backward glance in some detail may serve to highlight the learnings from the standpoint of both the instructor and the students.

The Instructor

The instructor's previous experience had consisted of elementary classroom teaching, clinical work with children and parents, and the teaching of developmental psychology courses to teachers. She saw in this Project some unique opportunities for teachers to learn about themselves as well as about their students, and to increase their understandings of behavior on an emotional as well as an intellectual level. Achievement of such goals required her then to consider both course content and instructional methods.

In reference to the content of a course in Mental Health, it appears that inevitably there is some overlapping of insights and to understandings common/the subject matter contained in psychology and the problems dealt with in psychotherapy. For a classroom teacher to understand that a child's destructive acts may be caused by negative feelings about himself or others instead of being merely "bad behavior" is an important first step in being helpful to a child. If the teacher has sufficient background to understand some of the theoretical formulations regarding the origins of anxiety, hostility, guilt, and the like, she may be even more effective in supplying some of the child's needs or in recognizing his incapacity for accepting what he most needs. To the extent that the teacher has become aware of her own negative feelings and defenses, to that extent she has a special bridge for understanding the disturbed child. And the deeper the

teacher's understanding of the origins of her own feelings, of course, the more free she is to see the child's situation clearly with a minimum of distortion due to her own problems. Practically then, the content of these courses was viewed in two dimensions: an intellectual extension of information about child behavior, and an emotional extension of understanding in instances where students were able to grasp some of the personal meaning of the content.

In reference to the instructional role, the courses also seemed to require a combination of therapeutic and educational understandings though its primary function was seen as instructional. Bernard (1959) describes the interconnection in this way, "The clinician-instructor (of in-service teacher education groups in mental health) must steer a middle course between the pitfalls of trying to bring about psychodynamic understanding in an emotional vacuum, since this cannot lead to understanding--or letting the interpersonal situation slide into an inappropriate, uncontrolled, quasi-therapeutic morass."

This middle road was not difficult for the instructor to follow when it involved presenting concepts about mental health and psychodynamics or when it called for a clarification and elaboration of the presentations made by the speakers on the basis of comments and questions raised by the students. Its direction was less clear when class members expressed attitudes which appeared to reflect unconscious resistance to threatening

material. To avoid the implications of such issues as the presence of aggressive impulses in nearly everyone, the likelihood of both love and hate characterizing a close relationship, and the benefits of recognition rather than denial of feelings, the class members often drew upon what Chisholm (1958) called the "binding certainties imposed in childhood" governing respect for authority, the rights of the group, and the need for firm discipline. In these instances the instructor usually accepted and restated the expressed reactions as being one person's point of view at that time, often not interpreting further or raising questions, except as class members did. This posed the problem of whether some of the psychodynamic understanding which was a goal of the two courses was being lost in the retreat to a more didactic emphasis. At the conclusion of the courses it appeared to the instructor that such procedures had led to some emotional insights on the part of some class members, but probably to a strengthening of intellectual defenses on the part of others. And perhaps this is par for such a course, as it probably is for any human experience.

Certain barriers to achievement of an understanding of mental health concepts, other than content and method, persisted throughout the courses, and were seen more clearly at the conclusion than when the courses were in progress:

1. The tendency of teachers to seek a solution to a child's problem before searching for an understanding of it.

2. Their tendency to focus only on a child's disruptive behavior and ways to modify it rather than examining their own reactions and feelings toward the child.
3. Their tendency to veer away from the unpleasant realities of problems in their own life and the lives of others and to adhere to an ideal of what life should be rather than what is.
4. Their tendency to expect a great deal of themselves as teachers, to be all things to all children, to have a profound and even "curative" effect on every child.
5. Their tendency to want to fix everything up so it will be all right rather than facing the insecurities within themselves, attempting to understand and handle them, and then helping children to do the same.

The Students

The participants in the courses described in their evaluations some of their reactions and learnings, and in individual instances attempted to account for them. The following material, with their permission, was drawn from their final evaluation sessions, one of which was recorded, from a reunion of one class five months after its last session, and from their final summary papers.

Both groups commented favorably on the learning climate of the courses. They appeared to be particularly appreciative of such an opportunity being given them, not only that the costs were taken care of for them in most instances, but that the topics, speakers, assignments, and time schedule had been worked out with special reference to their interests, needs, and

professional responsibilities. The excellent dinner provided for them probably did much to promote the esprit de corps among them, as did the condensation of fifteen meeting times into eight double sessions.

While the two groups suggested having fewer speakers at forthcoming Workshops, ^{or} making use of panel presentations by several speakers at the same meeting, the issues raised by the speakers formed much of the substance of the courses. Those mentioned most frequently were as follows: (1) Confidentiality of reports; (2) Long-term nature of change; (3) Limits of treatment results; (4) Preliminary considerations in accepting a child for treatment; (5) Dangers of labeling a child; (6) Usefulness of anecdotal descriptions when a child is referred for diagnosis or treatment; (7) Problems in communication among professional workers about a child; (8) Relevancy of anxiety and hostility to the educational process; (9) Importance of early identification of emotional problems; (10) Availability of assistance for teachers in dealing with disturbed children, and for the children themselves.

An Objective Evaluation

The Minnesota Teacher Attitude Inventory was administered to the class participants in each of the two courses, before and after being enrolled in the course. A Control group was used in the second course made up of teachers in the same county school system selected individually by each course member as

being similar to himself in attitudes toward children. The Control group took the tests at approximately the same time as did those enrolled in the course.

The MTAI is designed, according to its authors, to measure those expressed attitudes of teachers toward school work and children which are said to be indicative of how well a teacher gets along with pupils in interpersonal relations and, indirectly, how well satisfied the teacher is with teaching as a vocation. A validity coefficient on Form A of the test of .59 was obtained when test results were correlated with T-score averages of three outside criteria of teacher-pupil rapport as evaluated by principals, pupils, and experts. A reliability coefficient using the Split-half Spearman-Brown was .93. These figures are reported in the test manual.

For use in the Workshop Project then, a null hypothesis was assumed: namely, that there would be no change in the attitudes of class members toward children and teaching as measured by the MTAI before and after their enrollment in a course in Mental Health.

Results

A STATISTICAL COMPARISON OF PRE AND POST TEST SCORES MADE BY THREE TEACHER GROUPS ON THE MINNESOTA TEACHER ATTITUDE INVENTORY IN CONJUNCTION WITH A COURSE IN MENTAL HEALTH

	N	s _x pre-x post	Mean	SD	t
I <u>1958 Class Members</u>					
A. Scores BEFORE Taking Course	25		33.40	37.20	
B. Scores AFTER Taking Course	25	5.13	45.10	31.00	2.33*
II <u>1959 Class Members</u>					
A. Scores BEFORE Taking Course	26		47.50	21.36	
B. Scores AFTER Taking Course	26	4.5	62.39	19.20	3.14**
III <u>1959 Control Group</u>					
A. FIRST Scores	19		44.36	27.51	
B. SECOND Scores	19	.85	43.26	30.59	1.67

*Significant at the .05 level of confidence

**Significant at the .01 level of confidence

On the basis of application of a t-test of significance to the difference between pre and post test scores of class members, the null hypothesis for both groups in the Workshop Project can be rejected. In other words a change in scores as great as occurred between the pre and post tests of the class members in both the 1958 and the 1959 courses would be likely to occur by chance only five times in a hundred or less. Such changes in scores, to the extent that these scores can be assumed to be an outgrowth of reading, discussion, lectures, and instruction

occurring within the framework of the Workshop Project can be regarded as one type of evidence that such an experience was valuable to teachers in changing their attitudes in a positive direction toward children and teaching.

The fact that the Control group showed no difference between their initial and final test scores lends support to the above conclusions. However, it must be born in mind that such expressed teacher-pupil attitudes as measured by the test are probably simply indicators of the teacher's attitudes and may not reflect actual changes in behavior within the classroom.

CONCLUSION

This report has described the preliminary planning, procedures, and evaluation of a Workshop Project in Mental Health for teachers sponsored jointly by the Education and Scholarship Committees of the Morris County (New Jersey) Mental Health Association and the School of Education of Rutgers, The State University. Its outcomes might be summarized graphically by a statement made by one of the participants: "I've learned to be more realistic about children, that they are different, each one, and that there is no pat solution, no easy answer that can be applied in all cases. But more than that, I've found for the first time in a college course that I count, too. Either I didn't even think about myself, or I just blamed myself when things went wrong, instead of giving myself some of the credit and some of the understanding that I think is so important for children."

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